

## CLUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MW		04-06-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TL	OR	02/26/01
RESPONSE FORMALITY REVIEW	PS	JC906	02/03/02

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	2/26/01
2	5/31/01
3	10/6/01
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19	V N
20	N N
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24	V H
25	V L
26	V L
27	V W
28	V E
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Claim	Date
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If more than 150 claims or 10 actions  
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